CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1.	DATE OF REPORT	2.a. NAME OF CA	ANDIDATE OR C	COMMITTEE				
	1-22-2011	DONALD	HUSKEY					
2.b.	IF COMMITTEE, NAME OF CANDIDATE				3. ELECTION DATE			
					11-2-2	010		
4.a.	CAMPAIGN ADDRESS AND PHONE							
	Street or Rural Route	CHATTA	NOOGA	State	Zip Code	Phone		
	3603 RINGGOLD RD	CHATTA	NUUGA	TN	37412			
4.D.	CANDIDATE'S HOME ADDRESS (if different Street or Rural Route	t than 4.a.) City		State	Zip Code	Phone		
				Otolo		16-5203		
5.	OFFICE SOUGHT (include district number, i	f applicable)	6. NAME	OF POLITICAL	TREASURER (may be			
	, , , , , , , , , , , , , , , , , , , ,	· upproduct)				candidate)		
7.	CATEGORY OR REPORT (Check one)		L VI	RGINIA	IGOU			
						V		
	FIRST SECOND THIRD QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRIMARY	PRE-	MID-YEAR	YEAR-END		
8.a.	BEGINNING DATE OF REPORTING PERIOD	COARTER		GENERAL DATE OF REP	SUPPLEMENTAL PORTING PERIOD	SUPPLEMENTAL		
	10-24-2010			1-15-2	011			
9. (Check one)			1 10 2	OII			
	a This compaign is assemble and datable	- d - d d	4.71 . 47					
	 This campaign is exempt from detaile tures total \$1,000 or less for this report 	ed disclosure becaus orting period. (Comp	se contributions plete items 12d	s (including in- l., 12e, and 12	kind) received total \$1,00	00 or less AND expendi-		
	b. X This campaign is required to file a de and/or expenditures total more than !	stailed financial discli \$1,000 for this repor	osure because tina period.	contributions	(including in-kind) receive	ed total more than \$1,000		
10.	I/we do solemnly swear or affirm that the i	nformation contained	d in this camp	aion financial e	licologues espect in tour	- 74-14-1		
	accurate accounting of campaign contributi	ons and expenditure	es required to b	e reported by	the candidate committee	by the Campaign		
	Financial Disclosure Act. Additionally, I/we	swear or affirm that	no campaign	contributions h	ave been expended for t	he personal financial		
	benefit of the candidate or for any other no	npolitical purpose as	defined by the	e federal intern	al revenue code.			
	(D) 10 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2							
	signature of candidate	1/24/1	! }	Signature	of political treasurer	you 1/24/11		
	Signature of contiducte	V date		Signature	or political treasurer	date		
11.	WITNESS, & GNATHRE							
	.0 (/0//			1	Ω			
./	Lind Store	1124/11		Most	XA B	Made		
	signature of witness	date		Sign	nature of witness	<u> </u>		
						date		
12.	SUMMARY							
	a. BALANCE ON HAND LAST REPORT			*******************	\$ -543.03			
	b. TOTAL RECEIPTS THIS PERIOD				\$ 220.74			
	c. TOTAL DISBURSEMENTS THIS PERIOD	***********************	*****************		\$	_		
						-		
	d. BALANCE ON HAND (12.a. plus 12.b.	minus 12.c.)	*********		*******************************	\$ 00		
	e TOTAL LOANS OUTSTANDING	**************************	*****************			\$00		
		PM 3: 08						
	f. TOTAL OBLIGATIONS OUTSTANDING.	60.6 Mg	2S MAL	11	***************************************	. 00		
		HOLO						



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)		14. REPORT COVERING THE PERIOD						
RECEIPTS		FROM: 10-24-20101-15-2011						
15. CONTRIBUTIONS (other than loans and interest)								
a. Unitemized Contributions (\$100 or less from each source this p	a. Unitemized Contributions (\$100 or less from each source this period)\$ _20.74							
b. Itemized Contributions (over \$100 from each source this period	b. Itemized Contributions (over \$100 from each source this period)\$							
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add	c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)\$220.74							
16. LOANS RECEIVED THIS REPORTING PERIOD	\$							
17. INTEREST RECEIVED THIS REPORTING PERIOD	17. INTEREST RECEIVED THIS REPORTING PERIOD							
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in ite	em 12.b.)	\$ 220.74						
DISBURSEMENTS								
19. EXPENDITURES (other than loan payments)								
a. Expenditures (\$100 or less each payee this period) (must be liste	ed by category - e	e.g., printing, postage, gasoline)						
Advertising	\$ <u>518.</u>	94						
	\$	_						
Items returned to Office	\$							
Depot for credit	\$ (82.5	6)						
	\$							
	\$							
	\$							
	\$							
	\$							
Total of Evnanditures (\$100 or less each payer)		•						
Total of Expenditures (\$100 or less each payee)b. Itemized Expenditures (Over \$100 each payee this period)								
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a.								
20. LOAN REPAYMENTS MADE THIS PERIOD								
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)								
22. IN-KIND CONTRIBUTIONS								
a. Unitemized in-kind contributions (\$100 or less from each source this period)								
b. Itemized in-kind contributions (over \$100 from each source this period)\$								
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)								
23. OBLIGATIONS								
a. Unitemized Obligations Outstanding (\$100 or less each)\$								
b. Itemized Obligations Outstanding (Over \$100 each)\$								
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$								



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVE	RING THE PERIOD	
DONALD HUSKEY				FROM; 0-24-	10: 1-15-11	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTION	ONS FRO	M PRECEDING PA	GE (enter \$0 if first itemized p	page)	Amount	
COMPLETE THE APPROPRIATE ITEMS FOR EAR					.00	
First Name Middle Name			Contribution Received For:	Contribution Received For:		
Harold Last Name/Organization Name		Primary Election &	200.00			
Coker		La Friday Decilor A	Primary Election			
Address	Address					
6730 Standifer Ga	p Rd	Zip Code	Date of Contribution	Aggregate This Election		
^{Cit} Chattanooga	TN			Aggregate This crection		
Occupation			10-29-20			
Employer			_			
First Name	Middle Nam	ne	Contribution Received Fo	ır.	Amount of Contribution	
Last Name/Organization Name Unitemized Contribut	tions	,	LI Primary Election	Primary Election General Election		
Address	lons		Runoff (Local Election	ons Only)	20.74	
	1					
City	State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation	and an arrangement of the second					
Employer						
First Name	Middle Nan	ne	Contribution Received Fo	or:	Amount of Contribution	
, actions						
Last Name/Organization Name		Primary Election				
Address			Runoff (Local Electi			
	Tax	T= 0.4	5			
City	State	Zip Code	Date of Contribution		Aggregate This Election	
Occupation				Order		
Employer						
and speedy are						
First Name	Middle Nar	me	Contribution Received For		Amount of Contribution	
Last Name/Organization Name			Primary Election			
Address		Runoff (Local Elect				
	1	1		* /		
City	State	Zip Code	Date of Contribution		Aggregate This Election	
Cocupation						
Employer		_				
1 mm - 1 mm - 1 mm						
				Charles and the second second		
5 TOTAL ITEMIZED CONTRIBUTIONS						
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3, of next page if additional pages (If this is the last page of contributions, this amount must					220.74	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE DONALD HUSKEY 2. REPORT COVER					TO:	
2 TOTAL ITEMIZED CAMPAIGN EVDENDI	Amount 15 11					
4. COMPLETE THE APPROPRIATE ITEMS FOR	iod) • 00					
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PA 4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE First Name $Best\ Way\ Printing$ Middle Name			Purpose of Expenditure	, , ,	Amount of Expenditure	
Last Name/Business Name		Signs		518.94		
Address						
City	State Zip Code					
First Name	Middle Na	me	Purpose of Expenditure		Amount of Expenditure	
Office Depot Last Name/Business Name			Credit for	items ret	urned	
Address					(82.56)	
City	State	Zip Code				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name Middle Name			Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	lame Middle Name		Purpose of Expenditure	17	Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	Name Middle Name		Purpose of Expenditure	***************************************	Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional page (If this is the last page of expenditures, this amount management of the content of the conten	436.38					